

CLAIMS ONLY								Application Number		Filing Date					
								<i>10707283</i>							
								Applicant(s)							
								* May be used for additional claims or amendments							
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT										
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend			
1	1							51							
2								52							
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4	1							54							
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49								99							
50								100							
Total Indep								Total Indep							
Total Depend								Total Depend							
Total Claims								Total Claims							